EXHIBIT B

U.S. Department of Justice

Immigration and Naturalization Service

INVESTIGATION
PRELIMINARY WORKSHEET

Thomas Ohlson, SA	Date 3/4/2002	
FROM: Kevin Jarvis, SSA	Boston, MA	
IN RE:	File Number	
ASPILAIRE, Michel Ans	ge 477 906 438	
	SEARCH	
INS	OTHER	
(MIRAC (Central Index)) Pos In File	SOCIAL SECURITY	
NIIS WORSTUDENT NEG 1- file	TECS	
(DACS) POS In file	DMV	
EPIC	NCIC POS /- f:/e	
NAILS POS 1- file	OTHER (Specify)	
OTHER (Specify) CLAIMS NEG In File	THA RMV POS Infile	
ADDITIONAL INFORMATION REQUIRED	RESULTS	
Amening the Conference of the	A	
SUBJ arrested in conjunction w/	Re-instatement	
"Operation Safe Travel". SUBT deported		
(per 1-860) on 1/2/00 at Champlain, My		
to Canada. SUBJ re-entered onlaffer this		
date.		
DISPOSITION		
INVESTIGATION NOT RECEIVED	INVESTIGATION RECEIVED	
Does not meet PAC	Case not placed in progress.	
Not likely to result in success.	Case placed in progress	
Not an investigative matter	File Number Area G-23 Line 5/1.2.3	
Information not timely	Name Michel Ange ASPILAIRE	
OTHER (Specify)	Investigation warranted classification approved	
	Received (Date) 2/27/02 2/ Sci Initials	
	Assigned to SA OI Joseph Date assigned	
	Call-up	
SCI Initials Date	X 1997	
SCI Initials Date		

EXHIBIT C

U.S. Department of Justice Immigration and Naturalization Service

Order of Supervision

	File No: A79 139 702
	Date: March 8, 2002
Name	: ASPILAIRE, Michel Ange
On <u>01</u>	/02/00 , you were ordered: (Date of final order)
	Excluded or deported pursuant to proceedings commenced prior to April 1, 1997. Removed pursuant to proceedings commenced on or after April 1, 1997.
	se the Service has not effected your deportation or removal during the period prescribed by law, it is ordered that you be placed supervision and permitted to be at large under the following conditions:
\boxtimes	That you appear in person at the time and place specified, upon each and every request of the Service, for identification and for deportation or removal.
\boxtimes	That upon request of the Service, you appear for medical or psychiatric examination at the expense of the United States Government.
×	That you provide information under oath about your nationality, circumstances, habits, associations, and activities and such other information as the Service considers appropriate.
\boxtimes	That you do not travel outside Boston District for more than 48 hours without first
	(Specify geographic limits, if any) having notified this Service office of the dates and places of such proposed travel.
\boxtimes	That you furnish written notice to this Service office of any change of residence or employment within 48 hours of such change.
\boxtimes	That you report in person on the 1st business day of every month to this Service office at:
	unless you are granted written permission to report on another date.
\boxtimes	That you assist the Immigration and Naturalization Service in obtaining any necessary travel documents.
	Other:
	See attached sheet containing other specified conditions (Continue on separate sheet if required)
	127 Summer St Apt 1 Whill
	127 Summer St Apt 1 Malden, MA 02148 Melinda R. Lull / Deportation Officer
	(Print name and title of INS official)
	Alien's Acknowledgment of Conditions of Release under an Order of Supervision
ne coi	by acknowledge that I have (read) (had interpreted and explained to me in the English language) and intents of this order, a copy of which has been given to me. I understand that failure to comply with the terms of this order may to me to a fine, detention, or prosecution.
	hims R. Ohle, SA Midel Que ordinio 3/8/02
	(Signature of INS official serving order) (Date)